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1. CORRESPONDENCE ADDRESS		City, State and ZIP Code
26M1/1003		CO-INVENTOR'S NAME
LOWE, PRICE, LEBLANC & BECKER		Street Address
SUITE 300		City, State and ZIP Code
99 CANAL CENTER PLAZA		
ALEXANDRIA, VA 22314		<input type="checkbox"/> Check if additional changes are enclosed

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
First Named Applicant 08/250,791	05/27/94	034	FLYNN, N 2602	10/03/96

TITLE OF INVENTION	KOSTRESKI,	BRUCE
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(AS AMENDED) ATTY'S DOCKET NO.		CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
680-083							

3. Correspondence Address Change (Complete only if there is a change)
Lowe, Price, LeBlanc & Becker
99 Canal Center Plaza, Suite 300
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4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type) (1) NAME OF ASSIGNEE: BELL ATLANTIC		6a. The following fees are enclosed: <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____
(2) ADDRESS: (CITY & STATE OR COUNTRY) Arlington, VIRGINIA		6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER 12-2237 (ENCLOSE A COPY OF THIS FORM) <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies _____ <input checked="" type="checkbox"/> Any Deficiencies in Enclosed Fees
A. <input type="checkbox"/> This application is NOT assigned. <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		
PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.		
The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.		(Authorized Signature) L. R. Turkovich (Date) 12/27/96
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.		

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